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		<b>Attorney Docket Number</b>	PU040064		
		First Named Inventor	Michael Anthony Pugel et al.		
		COMPLETE IF KNOWN			
(37 CFR 1.63)		Application Number			
OR	☑Declaration Submitted after Initial	Filing Date	·		
	Filing (surcharge	Group Art Unit			
	required)	Examiner Name			
	DE NT A	OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))	TION FOR UTILITY OR DESIGN  TAPPLICATION  TO COMP  Application Number  Declaration OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e))  First Named Inventor  COMP  Application Number  Filing Date  Group Art Unit		

		<u>.</u>	·						
As a below named inve	ntor, i i	nereby declare tha	<b>t:</b>						
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
APPARATUS AND METHOD FOR CONTROLLING SIGNAL DISTRIBUTION USING A BACK CHANNEL									
the specification of which (Title of the Invention)									
☐ is attached hereto							. [		
OR					•				
was filed on (MM/DD/¹	was filed on (MM/DD/YYYY) March 9, 2004 as United States Application Number or PCT International								
Application Number PC	CT/US20	004/007270 and	was amended on (MM/DD	( <b>YYYY</b> )	October	27, 2004	(if applicable).		
I hereby state that I have review specifically referred to above.	ved and	understand the conter	nts of the above identified	specifica	tion, including	g the claims a	s amended		
I acknowledge the duty to discle applications, material information international filing date of the co	on which	i became available bet	ial to patentability as defir ween the filing date of the	ed in 37 prior ap	CFR 1.56, inc plication and	cluding for co the national o	ntinuation-in-part or PCT		
I hereby claim foreign priority bor 365(a) of any PCT internation and have also identified below, application having a filing date	nal app	lication which designa cking the box, any for	ted at least one country or eign application for patent	ther than t or inven	i the United S	states of Ame	enca, listed delow		
Prior Foreign Application			Foreign Filing Date		Priority	Certified Copy Attached?			
Number(s)		Country	(MM/DD/YYYY) Countr	y No	t Claimed	YES	NO		
						. 🗖			
☐ Additional foreign applicatio	n numbi	ers are listed on a sup	plemental priority data sh	eet PTO/	SB/02B attac	hed hereto:			
I hereby claim the benefit unde						•			
ApplicationNumber(s			MM/DD/YYYY)		,				
60/453,491 60/453,763	·		numbers a a suppleme	provisional re listed on ental priority 2B attached	data sheet				

[Page 1 of 4]

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# **DECLARATION** — Utility or Design Patent Application

							<del></del>		
Direct all corresp	Direct all correspondence to:  Customer Number or Bar Code Label				24498 OR		□ c <sub>o</sub>	☐ Correspondance address below	
Name	JOSEPH S. TR	IPOLI							
Address	Thomson Licen	sing Inc.					- <u> </u>		
Address PO Box 5312									
City					State		ZIP		
PRINCETON					NJ		08543	-5312	
Country		Tele	phone			i		Fax	
USA		609-7	34-6813		,		609-7	34-6888	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:               A petition has been filed for this unsigned inventor									
Given Name MICHAEL ANTHONY  A A A A A A A A A A A A A A A A A A A									
Inventor's Signature Muleu Amaria					Page 11/8/05			ate /8/05	
Residence: City State					Country		Ci	tizenship .	
NOBLESVILLE		IN	DIANA		JS	<del></del>	U	S	
Mailing Addres	s						<u></u>		
Mailing Addres	s 20925	Creek Roa	d						
City		State		ZIP	ZIP Country				
Noblesville		Indiana		460	50	us	•		
NAME OF SEC	OND INVENTO	OR:			A petition has be	en filed fo	or this	unsigned inventor	
Given Name D	OUGLAS EDW	ARD			Family Name LANKFORD or Surname				
Inventor's Signature		ubbe !	lust		Date NOV 8	3 200	5	· · · · · · · · · · · · · · · · · · ·	
Residence: Cit	у		State		Country	••		Citizenship	
CARMEL	<u></u>		INDIANA		us us			บร	
Mailing Addres	ss				·				
Mailing Addres	s 5256 Ch	eyenne Mod	on						
City		State			ZIP			Country	
Carmel		Indiana			46033		US	<u> </u>	
Additional	Inventors are be	ing named on	the <u>2</u> supplem	ental A	Additional Inventor(s)	sheet(s) P	TO/SB/	02A attached hereto.	

PTO/SB/02A (08-03)

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**ADDITIONAL INVENTOR(S)** 

### **DECLARATION**

### **Supplemental Sheet**

Page 3 of

Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor			
Given N	lame (first and middle	[if any])		Family Name or Surname			
JOHN JOSEPH			(	CURTIS , pr	<u> </u>		
Inventor's Signature	Monagh Co	at a				Date 11/16/05	
Residence: City	NOBLESVILLE	State INDIANA	<u>Co</u>	ountry	us ————	Citizenship US	
Mailing Address	·			·····			
Mailing Address	121 Scarborough Circ	cle					
City Noblesville	3	State Indiana	<u>ZIP</u> 46069 Cour			Country US	
Name of Additional Inventor, if any				A petition h	as been filed	for this unsigned inventor	
Given Name (first and middle [if any])				Family Name or Surname			
KEITH REYNOLDS				WEHMEYER			
Inventor's Signature Zeath Remalls Well				Date 11/11/05			
Residence: City	FISHERS	State INDIANA	(g	ountry	us	Citizenship US	
Mailing Address							
Mailing Address	6411 Columbia Circle		<del></del>		<del></del>		
City	Fishers SI	tate Indiana	Zi	<u>p</u> 46038		Country US	
Name of Additiona	al inventor, if any	y	,	☐ A petition has been filed for this unsigned inventor			
Given I	Name (first and middle	(if any))			Fa	mily Name or Sumame	
MIKE ARTHUR				DERRENBERGER			
Inventor's Signature						Date	
Residence: City	Valencia	State Californ	ia <u>C</u>	ountry	US	<u>Citizenship</u> US	
Mailing Address							
Malling Address	24123 Backbay Cou	rt					
City	Valencia	State Californ	ia	<u>Zip</u>	91355	Country US	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



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### **DECLARATION**

### ADDITIONAL INVENTOR(S)

#### **Supplemental Sheet**

Page 4 of 4

Name of Additio	nal Inventor, if ar	ıy	☐ A petition has been filed for this unsigned inventor				
Give	n Name (first and middl	le [if any])	ļ	Family Name or Surname			
TERRY WAYNE			LO	CKRIDGE	RIDGE		
Inventor's Signature						Date	
Residence: City	DAYTON	State OHIO	Cour	ntry US		Citizenship US	
Mailing Address							
Mailing Address	5478 Grantland Dri	ve					
City Dayton		<u>Ştate</u> Ohio	ZIP	ZIP 45429 Country US			
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
ANDREW ERIC				OWYER			
Inventor's Signature	the En	2 1500	m			Date NOV 8, 2505	
Residence, City	INDIANAPOLIS	State INDIANA	Cour	ntry US		Citizenship US	
Malling Address							
Mailing Address	8767 Shelbyville R	oad					
City	Indianapolis	State Indiana	Zip	46259	Co	untry US	
Name of Addition	onal inventor, if a	ny	☐ A petition has been filed for this unsigned inventor				
Give	en Name (first and midd	lle [if any])	Family Name or Surname				
Inventor's Signature	-					Date	
Residence: City		<u>State</u>	Cou	intry		Citizenship	
Mailing Address							
Mailing Address							
City		State		Zip	С	Country	

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		Attorney Docket Number	PU040064	
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION			First Named Inventor	Michael Anthony Pugel et al.
			COMPLETE IF KNOWN	
(	(37 CFR 1.63)		Application Number	
☐Declaration Submitted	OR	☑Declaration Submitted after Initial	Filing Date	
With Initial		Filing (surcharge	Group Art Unit	
Filing		(37 CFR 1.16 (e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:										
My residence, post office	My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, firm are listed below) of the subje	st and s	ole inventor (if only one er which is claimed and	e name is listed below) or a for which a patent is soug	an original, first and ht on the invention	oint inventor (if	plural names				
APPARATUS AND METHOD FOR CONTROLLING SIGNAL DISTRIBUTION USING A BACK CHANNEL										
the specification of which (Title of the Invention)										
is attached hereto										
OR				·	•					
was filed on (MM/DD/YYYY) March 9, 2004 as United States Application Number or PCT International										
Application Number Po	CT/US2	004/007270 and	was amended on (MM/DD	(YYYY) Octob	er 27, 2004	(if applicable).				
I hereby state that I have review specifically referred to above.	wed and	understand the conte	nts of the above identified	specification, includ	ng the claims a	s amended				
I acknowledge the duty to disci applications, material informati international filing date of the c	on whic	h became available be	tween the filing date of the	ed in 37 CFR 1.56, prior application an	including for co	ntinuation-in-part or PCT				
I hereby claim foreign priority to or 365(a) of any PCT internation and have also identified below application having a filing date	onal ap	plication which designatecking the box, any for	ited at least one country or eign application for patent	ither than the United t or inventor's certific	States of Ame	rica, listed below				
Prior Foreign Application			Foreign Filing Date	Priority	Certified Copy Attached?					
Number(s)		Country	(MM/DD/YYYY) Countr	y Not Claimed	YES	· NO				
	-									
		·								
		Ð								
☐ Additional foreign application	n numi	pers are listed on a sup	plemental priority data she	eet PTO/SB/02B att	ched hereto:	·				
I hereby claim the benefit under	er 35 U.	S.C. 119(e) of any Unit	ed States provisional app	lication(s) listed belo	w.	•				
ApplicationNumber(s	)	Filing Date (	MM/DD/YYYY)							
ApplicationNumber(s) Filing Date (iv 60/453,491 03/11/2003 03/11/2003				numbers a supple	al provisional are listed on mental priority 02B attached	data sheet				

[Page 1 of 4]

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# **DECLARATION** — Utility or Design Patent Application

				_		<del>,</del>			
Direct all corresp	ondence to:		mer Number r Code Label		24498	OR	☐ Cor	respondance address below	
Name	JOSEPH S. TR	IPOLI							
Address	Thomson Licen	sing Inc.							
Address PO Box 5312									
City					State		ZIP		
PRINCETON					NJ		08543	-5312	
Country		Te	elephone					Fax	
USA	·	60	9-734-6813				609-7	34-6888	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:                A petition has been filed for this unsigned inventor									
Given Name MICHAEL ANTHONY Family Name PUGEL or Sumame									
Inventor's Signature							Date		
Residence: City State					Country		Ci	Citizenship	
NOBLESVILLE			INDIANA		US		U	<u> </u>	
Mailing Addres	S				·	<del></del>			
Mailing Addres	s 2092	5 Creek R	oad	-	<u> </u>			<del></del>	
City		State		ZIP	ZIP Country				
Noblesville		Indiana		460	060	US		·	
NAME OF SEC	COND INVENT	OR:		_ [	☐ A petition has be	en filed fo	r this u	unsigned inventor	
Given Name D	OUGLAS EDW	/ARD			Family Name LANKFORD or Surname				
Inventor's Signature				·	Date				
Residence: Cit	у .		State		Country			Citizenship	
CARMEL			INDIANA		US			us	
Mailing Addres	SS								
Mailing Addres	ss 5256 Ct	neyenne N	loon						
City		State			ZIP			Country	
Carmel	·	Indiana			46033		US	8	
Additional	inventors are be	ing named	on the 2 supplem	ental	Additional Inventor(s)	sheet(s) PT	O/SB/0	02A attached hereto.	

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### **ADDITIONAL INVENTOR(S)**

### **DECLARATION**

### **Supplemental Sheet**

Page 3 of

Name of Additiona	al Inventor, if an	у		☐ A petition has been filed for this unsigned inventor					
Given N	Name (first and middle	e [if any])		Family Name or Surname					
JOHN JOSEPH				CURTIS					
Inventor's Signature			· ·	i,				Date	
Residence: City	NOBLESVILLE	State INDIANA	ع	Country		US		Citizenship US	
Mailing Address									
Mailing Address	121 Scarborough Ci	ircle							
City Noblesville		State Indiana	2	<u>ZIP</u> 46060 Cou			Coul	ntry US	
Name of Additiona		☐ A pe	tition l	nas been filed	d for ti	his unsigned inventor			
Given Name (first and middle [if any])					Family Name or Sumame				
KEITH REYNOLDS					WEHMEYER				
Inventor's Signature						·		Date	
Residence: City	FISHERS	State INDIANA		Country		US	٠	Citizenship US	
Mailing Address									
Mailing Address	6411 Columbia Circ	cle						· · · · · · · · · · · · · · · · · · ·	
City	Fishers	State Indiana		Zip	46038	3	Cou	untry US	
Name of Addition	al Inventor, if ar	ny			\ petitid	on has been	filed f	for this unsigned inventor	
Given	Name (first and midd	lle [if any])				F	amily	Name or Sumame	
MIKE ARTHUR				DERF	RENBE	RGER			
Inventor's Mile	arthu (	Sevenhan						Date 11/08/05	
Residence: City	Valencia	State Californ	nia	Country		US		<u>Citizenship</u> US	
Mailing Address				,					
Mailing Address	24123 Backbay Co	ourt -							
City	Valencia	State Californ	nia	Zi	5	91355	C	ountry US	

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### **DECLARATION**

#### **ADDITIONAL INVENTOR(S)**

#### Supplemental Sheet

Page 4 of

Name of Additiona	me of Additional Inventor, if any				for this unsigned inventor		
Given I	Name (first and mide	ile [if any])		· .	Family	Name or Surname	
TERRY WAYNE			ro	CKRIDGE			
inventor's Signature					•	Date	
Residence: City	DAYTON	State OHIO	Cour	ntry US		Citizenship US	
Mailing Address							
Mailing Address	ive						
City Dayton	<del>.</del>	State Ohio	ZIP	45429	Col	untry US	
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Sumame			
ANDREW ERIC				OWYER			
Inventor's Signature						Date	
Residence: City	INDIANAPOLIS	State INDIANA	Cou	intry US		Citizenship US	
Mailing Address					<del> </del>	•	
Mailing Address	8767 Shelbyville F	Road					
City	Indianapolis	State Indiana	Zip	46259	Co	untry US	
Name of Addition	al Inventor, if a	iny		A petition has been filed for this unsigned inventor			
Given	Name (first and mid	dle [if any])			Family	Name or Sumame	
		· · · · · · · · · · · · · · · · · · ·					
Inventor's Signature						Date	
Residence: City		<u>State</u>	Cou	untry		<u>Citizenship</u>	
Mailing Address			<u>.</u>			·	
Mailing Address						•	
City		State		Zip	C	Country	

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		Attorney Docket Number	PU040064	
DECLARAT		FOR UTILITY OR SIGN	First Named Inventor	Michael Anthony Pugel et al.
PATENT APPLICATION		COMPLETE IF KNOWN		
(3	(37 CFR 1.63)		Application Number	/
☐Declaration Submitted	OR	□ Declaration     Submitted after Initial	Filing Date	
With Initial	Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit	•	
Filing		, , , , , , , , , , , , , , , , , , , ,	Examiner Name	

	<u>,,                                    </u>		····							
As a below named invent	tor, I hereby declare tha	t:								
My residence, post office a	iddress, and citizenship a	re as stated below next	t to my name.		1					
I believe I am the original, first are listed below) of the subject	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
APPARATUS AND I USING A BACK CH	·	ITROLLING SIGNA	AL DISTRIBUT	ION						
the specification of which	the specification of which (Title of the Invention)									
is attached hereto										
OR	·									
was filed on (MM/DD/YYYY) March 9, 2004 as United States Application Number or PCT International										
Application Number PC1	Application Number PCT/US2004/007270 and was amended on (MM/DD/YYYY) October 27, 2004 (if applicable).									
I hereby state that I have reviewe specifically referred to above.	ed and understand the conte	nts of the above identified	specification, including	g the claims as	amended					
I acknowledge the duty to disclos applications, material information international filing date of the cor	n which became available bet	tween the filing date of the	ed in 37 CFR 1.56, inc prior application and	cluding for con the national or	tinuation-in-part PCT					
I hereby claim foreign priority be or 365(a) of any PCT internation and have also identified below, I application having a filing date be	ial application which designa by checking the box, any for	ited at least one country of eign application for patent	ther than the United S or inventor's certifica	States of Amer	ica, listed below :					
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached?						
Number(s)	Country	(MM/DD/YYYY) Country	y Not Clalmed	YES	NO					
		<u> </u>								
		·								
☐ Additional foreign application	numbers are listed on a sup	plemental priority data she	et PTO/SB/02B attac	hed hereto:						
I hereby claim the benefit under										
ApplicationNumber(s)		MM/DD/YYYY)		<del>.</del>						
60/453,491 60/453,763	03/11/2003 03/11/2003		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

[Page 1 of 4]

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:   Customer Number or Bar Code Label					24498 OR (		☐ Correspondance address below		
Name	JOSEPH S. TRIPOLI								
Address	Thomson Licensing Inc.								
Address	Address PO Box 5312								
City					State		ZIP		
PRINCETON					NJ		08543-5312		
Country	intry Telephone						Fax		
USA	A 609-734-6813				·		609-734-6888		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:									
Given Name MICHAEL ANTHONY					Family Name PUGEL or Surname				
Inventor's Signature					Date			·	
Residence: City	y		State		Country	,	Citizenship	·	
			INDIANA		us		us		
Mailing Addres	S								
Mailing Addres		5 Creek R	load			·			
City				ZIF		Country			
Noblesville				ļ	060	US			
NAME OF SECOND INVENTOR:   A petition has been filed for this unsigned inventor							ventor		
Given Name DOUGLAS EDWARD					Family Name LANKFORD or Surname				
Inventor's Signature				Date					
Residence: Cit	Residence: City State			Country		Cit	izenship		
CARMEL		,	INDIANA	l	us		us		
Mailing Address									
Mailing Address 5256 Cheyenne Moon									
City		State			ZIP		Country		
Carmel	Indiana				46033 US				
Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.									

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#### **ADDITIONAL INVENTOR(S)**

### **DECLARATION**

### **Supplemental Sheet**

Page 3 of 4

Name of Additional Inventor, if ar		☐ A petition has been filed for this unsigned inventor					
Given Name (first and midd		Family Name or Surname					
JOHN JOSEPH		CU	CURTIS				
Inventor's Signature				· ···	Date		
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Mailing Address							
Mailing Address 121 Scarborough Circle							
City Noblesville	State Indiana	ZIP	46060	Cou	untry US		
Name of Additional Inventor, if a		☐ A petition has been filed for this unsigned inventor					
Given Name (first and midd		Family Name or Surname					
KEITH REYNOLDS	w	WEHMEYER					
Inventor's Signature				Date			
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Mailing Address							
Mailing Address 6411 Columbia Circle							
City Fishers	State Indiana	Zip	Zip 46038 Country US				
Name of Additional Inventor, if a	·	☐ A petition has been filed for this unsigned inventor					
Given Name (first and mide		Family Name or Sumame					
MIKE ARTHUR	D	DERRENBERGER					
Inventor's Signature			·	Date			
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Mailing Address							
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This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# DECLARATION ADDITIONAL INVENTOR(S) Supple

#### **Supplemental Sheet**

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Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
TERRY WAYNE		LO	LOCKRIDGE					
Inventor's Signature Lockwold						Date 11/09/05		
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Mailing Address 5478 Grantland Drive								
City Dayton		State Ohio	ZIP	45429	intry US			
Name of Additional Inventor, if any				☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
ANDREW ERIC				BOWYER				
Inventor's Signature						Date		
Residence: City	ce: City INDIANAPOLIS State INDIANA Country US			ntry US	Citizenship US			
Mailing Address								
Malling Address 8767 Shelbyville Road								
City	Indianapolis	State Indiana	<u>Zip</u>	46259	Co	Country US		
Name of Additional Inventor, if any				A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])				Family Name or Surname				
inventor's Signature						Date		
Residence: City State			Cou	intry		Citizenship		
Mailing Address								
Malling Address .								
City <u>State</u>		State		<u>Zip</u>	C	Country		

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